

CITY OF MESQUITE MESQUITE FIRE & RESCUE

esquite Nenda

10 EAST MESQUITE BLVD. MESQUITE, NV 89027 Phone (702) 346-2690 Fax (702)346-5242

INSPECTION OVERTIME REQUEST & AUTHORIZATION

□ INSPECTOR	□ PLAN REVIEW	□ ACTING PAY	□ CALL BACK	□ OTHER	
CONTRACTOR:					
Company Name:			Contact Name:		
Address:			Telephone/FAX:		
PROJECT/EVEN	<u>T</u> :				
Project Name:			Plan/Permit #		
Project Address:			Event Name:		
Type of Inspection R	equested:				
Inspection Date:			Requested Time:		
CONDITIONS OF	FIRE INSPECTOR	OVERTIME PAY	MENT:		
per person, for a minim Accept this as my requirepresentatives of Meson	um of two (2) hours, includi est and agreement to pay a quite Fire & Rescue. I have	ng travel time. Il costs incurred for the read and agree to the	ift will be compensated at a rainspection, which is being conconditions of Fire Prevention	nducted on overtime by overtime payment.	
Signed:		Title:	Da	ate:	
Approving Supervisor	r:	Confirmed with:	Date/Time:		
Lead/Additional Personnel:			Inspector's Phone # Given: □		
REMARKS:					
			TOTA	AL HOURS: NSPECTION:	
				JNT DUE: \$	
Contractor Represen	tative Date	<u>_</u>	/IF&R Representative	 Date	